



## Primary Care Navigation

---

Research into the experience of primary care staff and patients in County Durham

March 2019



## Contents

Healthwatch County Durham.....	3
Executive summary .....	4
What people told us .....	5
Background to this work .....	7
What we did .....	9
What we heard .....	10
Observations and considerations .....	15
Appendix 1: Care Navigation Staff Survey.....	19
Appendix 2: Care Navigation Patient Survey.....	21



## Healthwatch County Durham

Healthwatch County Durham is the county's consumer champion for health and social care, representing the voices of current and future users to decision makers.



### **We listen**

We listen to patients of health services and users of social care services, along with their family members or carers, to find out what they think of the services they receive.



### **We advise**

We advise people how to get the best health and social care for themselves and their family. We provide help and information about all aspects of health and social care provided in County Durham.



### **We speak up**

We make sure that consumers views are heard by those who provide health and social care. Wherever possible we try to work in partnership with providers to influence how they make improvements.

## Executive summary

In 2018 Healthwatch County Durham (HWCD) was approached by the Clinical Commissioning Groups (CCGs) for the County to independently evaluate the Care Navigation system. Care Navigation is the system where trained, non-clinical staff, talk to patients when they book an appointment, providing information about the professionals or services that may be suitable for a patient's needs. The CCGs wanted to understand the views and experiences of staff who were implementing the system and patients who were using it.

To capture the views of both staff and patients we developed two online surveys, one for each group. We emailed the staff survey to Practice Managers, stressing our independence and confidential nature of this work. Practice Managers were asked to forward the survey on to appropriate staff. In addition HWCD staff visited GP practices and talked to staff from 10 surgeries across the County. Approx. 500 staff across both CCGs have been trained in Care Navigation and we have received 115 completed surveys, although it should be noted that some surveys were completed by groups of staff and not just by individuals.

We utilized a mixed model of engagement to get feedback from patients. This included using social media, publicizing our online survey via our e-bulletin, sharing the survey with partners/networks as well as face to face engagement. HWCD staff and volunteers visited GP practices to talk to patients in 9 surgeries. We received 352 completed surveys from patients.

## What people told us

### Staff responses

When asked if Care Navigation is working well on a day to day basis, 79% responded 'Yes'.

Practice staff were who asked if they felt supported to implement the system. Respondents stated that they were supported by a range of people including GPs, CCGs and PPGs. 86% of respondents said that they felt supported by other reception/admin staff and 73% felt supported by Practice Managers.

In addition:

- 85% of respondents felt they had sufficient knowledge to enable them to implement Care Navigation effectively whilst 80% also felt they had sufficient information regarding the external services
- 56% of respondents found the external services helpful, with 33% finding them very helpful and 11% finding them unhelpful
- Other services staff would like to navigate to include physiotherapy and dental services
- 75% did not feel they needed any further ongoing support

### Patient responses

The largest number of respondents, 35%, was in the 50 - 64yrs age group.

79% of respondents made their appointment by telephone and of these, 62% confirmed that they heard a telephone message explaining that they would be asked some questions to best direct their enquiry. However 25% said they did not hear a message with 13% not being sure.

In addition:

- 69% of respondents were happy to explain to the receptionist about the reason for their call/visit
- 74% felt they were listened to
- 71% had confidence in the person they were talking to
- 76% felt the information was clear and relevant
- 73% were happy with the outcome

As a result of the conversation with a navigator 64% were given an appointment with a GP.

## Observations

Care Navigation is seen as a positive development by both staff and patients but more could be done to improve the service. Many comments were received on how the service could be improved, some are highlighted in this report, but the full list of comments should be read to better understand the needs of staff delivering the service.

Training - this was a theme that emerged across several questions, both in relation to training new staff and ongoing training for staff who are already using the system. Consideration should be given to responding to this need as staff commented that they felt this was important to support staff to develop their confidence and skills base.

Staff commented that they are unclear as to how the link to external services works once they have signposted a patient. Further clarity on this would be helpful for staff as would additional information on waiting/opening times for these services.

Additional external services that staff would like to navigate to included physiotherapy and dental services. It would be helpful for staff to know what the future plans are to bring additional services onto the system.

Staff made some specific comments around receiving updates eg feedback showing what difference care navigation had made to GP appointments and sharing best practice between surgeries. Communicating positive messages to staff via newsletters etc could be considered.

Forty four comments were received from staff on various topics, ranging from suggestions on how to improve the system to general comments on the role of Care Navigation in Primary Care Services. These should be considered in full as they could have a positive impact on future delivery.

Feedback highlighted that 25% patients did not hear a message when they telephoned to make an appointment. The CCGs could re-iterate the importance of this message and ask all practices to ensure a message is relayed explaining the purpose of Care Navigation.

Respondents repeatedly made the comment that the receptionist was not qualified to deal with their problem. Surgeries could relay in their telephone message that navigators are trained to take the call but will not make a clinical decision, as this message is currently not getting across to patients.

Comments were made about the recorded telephone message being frustratingly long, particularly when having to ring repeatedly at 8.00am. Could the option to skip the message after it's been played once be considered? Patients also asked if the telephone systems could tell them their number in the queue.

Consideration should be given to patients with hearing loss as they reported that they found the system difficult to access. Technology could be used to support these patients.

Whilst 69% of patients were happy to explain to the receptionist the reason for their call, those who weren't happy had concerns about confidentiality and privacy. All surgeries should look at their reception areas and call handling to ensure they are maximizing the opportunity for patients to speak in private.

We received forty two comments when we asked if patients felt they were listened to, citing a formulaic script, requesting an appointment with a GP but not being given one and abrupt receptionists as some of the reasons why. Could this issue be addressed through training?

Although we were not asking patients about their experiences of getting an appointment with a GP, many of the comments we received related to this. The lack of available appointments, the difficulty of having to ring the surgery at 8.00am or visit at that time and the length of time patients had to wait before they were able to see a GP were repeatedly raised. Could patients' concerns be partially addressed by providing further information on Care Navigation that highlights the aim of reducing the demand for GP appointments?

## Background to this work

The CCGs in County Durham are committed to improving patient experience and Durham Dales states in its strategy that it will “Maximise opportunities to develop a modern, accessible centred General Practice in DDES”.

In 2018 Healthwatch County Durham (HWCD) was approached by the Clinical Commissioning Groups (CCGs) for the County to independently evaluate the Care Navigation programme. Care Navigation is the system where trained, non-clinical staff, talk to patients when they book an appointment, providing information about the professionals or services that may be suitable for a patient's needs. The CCGs wanted to understand the views and experiences of staff who were implementing the system and patients who were using it.

The development of Care Navigation locally has been done with a range of partners and the CCGs wanted to ensure that their voices are continually included in the future development of the programme across the County.

The aim of Care Navigation is to make sure that every patient is able to see the right person to provide them with the right care at the right place and time. This will support GP's to manage their busy practices so that appointments are available to patients when they need them. Care Navigation offers patients choice about where and with whom they receive treatment and support.

Patients do not have to accept what is being offered through Care Navigation and they can still request to see a GP or another member of practice staff. However, a note that the offer of Care Navigation was declined will be added to the patient's record in order to monitor the service.

Care Navigation is currently only offered in cases where the reason for an individual contacting the practice relates to one of the identified seven 'pathways'. These seven pathways are:

- Stopping smoking
- Sexual health
- Community Pharmacy
- Citizens Advice Bureau (e.g. benefits and evidence claims)
- Well-being for Life support (e.g. Weight loss)
- Minor Eye ailments (in place from Winter 2018)
- GP practice services already provided by other members of staff (e.g. Immunisations)

Trained receptionists (navigators) go through a prepared narrative using specially designed computer software to decide the most appropriate support. As a result they can refer patients to alternative services. Further information about Care Navigation can be found on this link: [Care navigation in County Durham](#)

Further information about the priorities of the CCGs in County Durham can be found in the links to the documents below.

- [DDES refreshed strategy](#)
- [North Durham refreshed strategy](#)



## What we did

We wanted to capture the views of staff implementing Care Navigation and of patients accessing the system. In relation to staff, we wanted to find out what works and what doesn't on a day to day basis from their perspective and to find out if there are any unintended consequences of the system. In relation to patients we wanted to find out what impact the Care Navigation approach has had on their experience within primary care.

To capture the views of both staff and patients we developed two online surveys, one for each group. We emailed the staff survey to Practice Managers, stressing our independence and confidential nature of this work. Practice Managers were asked to forward the survey on to appropriate staff. The CCGs also emailed Practice Managers and Patient Reference Groups again stressing HWCD's independence and that all responses are made anonymously. In addition HWCD staff visited GP practices and talked to staff from 10 surgeries across the County. We received 115 completed surveys from staff.

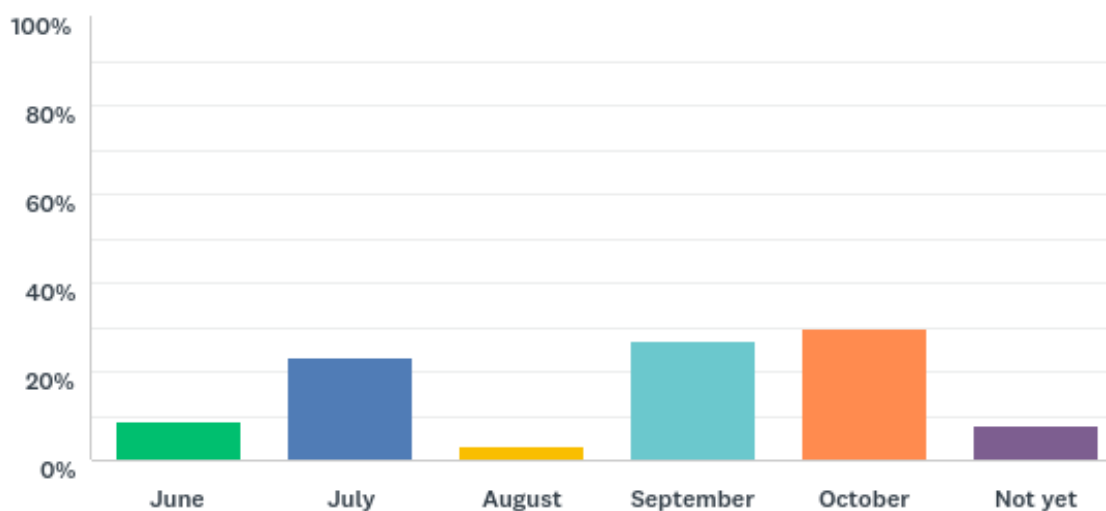
We utilized a mixed model of engagement to get feedback from patients. This included using social media, publicizing our online survey via our e-bulletin, sharing the survey with partners/networks as well as face to face engagement. HWCD staff and volunteers visited GP practices to talk to patients in 9 surgeries. We received 352 completed surveys from patients.

It should be noted that there are 71 GP practices in County Durham providing primary healthcare for a population of approximately 522,000 people (PHE Local Authority Health Profile 2018). Not all of the practices have implemented the Care Navigation system at this point in time.

## What we heard

### Staff responses

#### Q1 When did you go live with Care Navigation?



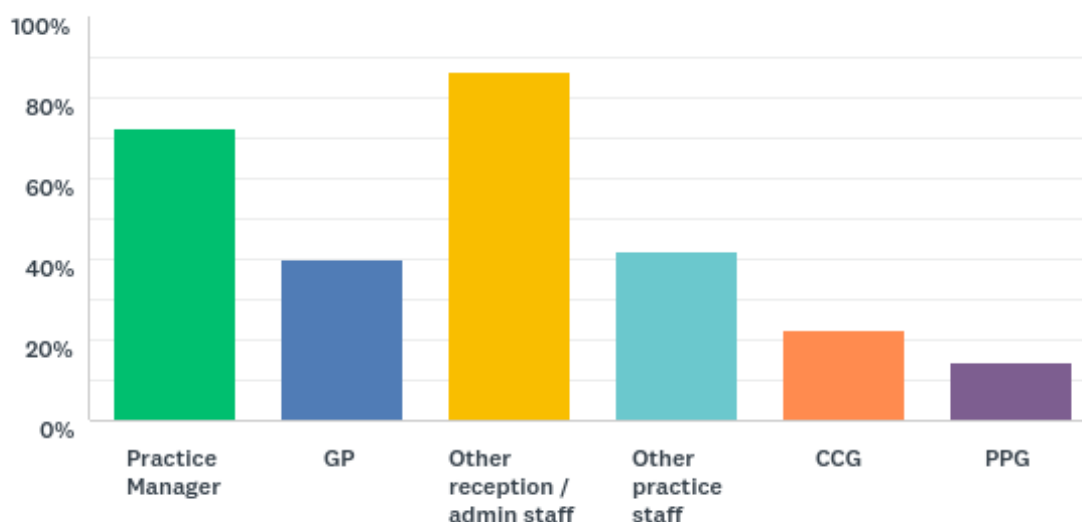
When we asked if Care Navigation is working well on a day to day basis, 79% responded 'Yes' but we also received 76 suggestions on how the system could be improved including:

- Increasing the number of external services that staff can navigate to
- Have additional information on the external services
- Staff would like the Care Navigation template to pop up automatically when entering a patient's details
- A dummy template to let staff 'play' with the system prior to going live would have been helpful

There were also some general comments about how difficult it is to ensure confidentiality in the surgery, particularly at 8.00am when there is a queue of patients and that the process takes too long to deliver at busy times.

Practice staff were asked if they felt supported to implement the system and replied as follows:

Q4 To implement the programme have you felt supported by (tick all that apply):



Although 85% of respondents felt they had sufficient knowledge to enable them to implement Care Navigation effectively in their practice, 16 of the 22 staff who made additional comments felt they needed additional training, information and support to develop their confidence and skills base.

80% of respondents felt they had sufficient information regarding the external services to enable them to signpost patients to and to support them with their queries. However, a number of additional comments were made stating that staff weren't sure about how the links to external services work and that they are reliant on the patient contacting the service themselves. Staff would also welcome additional information on waiting times/opening times for services.

56% of respondents found the external services helpful, with 33% finding them very helpful and 11% finding them unhelpful. Staff were asked which other external services they would like to navigate patients to. The most popular were physiotherapy and dental services although eye care, mental health and social services were also noted.

The majority of respondents, 75%, did not feel they needed any further ongoing support but there were an additional 20 comments making some general points, e.g:

- Receive regular updates to show how much of a difference it has made to GP appointments
- Sharing best practice between surgeries
- Refresher training
- Get the message out to patients that staff are finding the best service for them and that they don't always need to see a GP

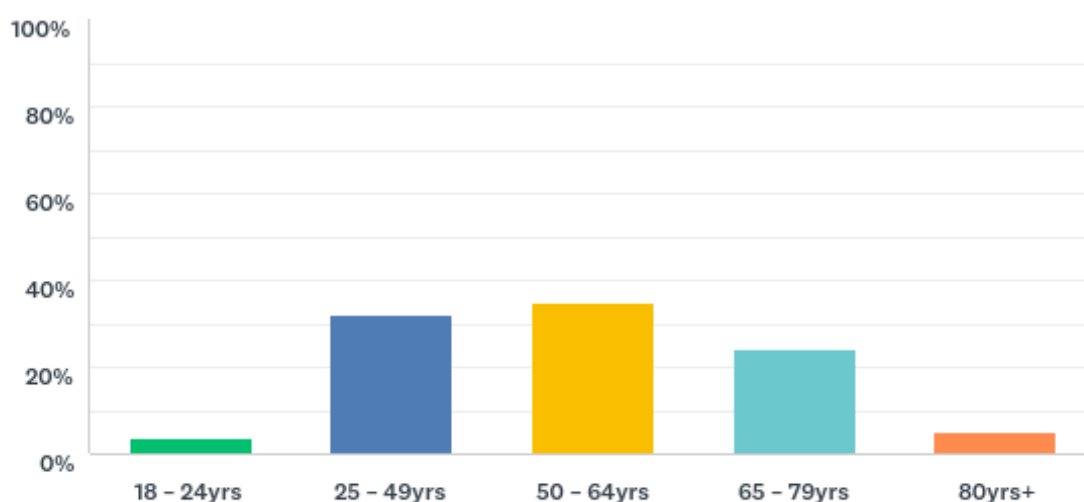
We also gave staff the opportunity to share any other thoughts on Care Navigation with us and received 44 comments, some of which were very specific to the system and some more generalized. A sample is listed below:

- Would have liked the opportunity to 'play' on the system before it went live as the training was quite a long time ago, copies of the training presentation would have been helpful.
- The quick links on the right hand side of the page do not work very well- if they did it would speed things up
- There are too many "clicks" to get to where you need to be and the patients care records have to be brought up to access the navigation system, even if they ultimately decline the offer
- It would be better if the internal links tab was the one that automatically opened in care navigation database rather than the external one (which they use less often)
- As a GP I can't see how it has made any impact on my workload so would be interested to see how you are able to show it is helping the clinicians in practice
- I think it's really good and will be highly effective, however not all staff use it all of the time and I think this is something that they'll need to be encouraged to do so that it'll work in the long run
- When navigating to Pharmacy it is common for the patient to say they have already been there

## Patient responses

A range of age groups are reflected in the respondents:

### Q1 What is your age group?



79% of respondents made their appointment by telephone and of these, 62% confirmed that they heard a telephone message explaining that they would be asked some questions to best direct their enquiry. However 25% said they did not hear a message with 13% not being sure.

We asked patients if they were happy to explain to the receptionist the reason for their call/visit, with 69% responding that they were. Of those who weren't happy the main reasons were a lack of privacy and confidentiality as well as feeling embarrassed. Many patients commented that the receptionist was not trained or qualified to deal with their health problem. These comments ranged from:

- Because I see the doctor for that

To the more complex:

- I have mental health problems and suffer borderline personality disorder so the receptionist doesn't know how to deal with me

Patients with hearing loss found the system very difficult to access appropriately.

We asked patients if they felt they were listened to and 74% felt they were. However forty two additional comments were made, covering a range of topics stating that the script is formulaic, that they asked to see a GP but were given an appointment with a nurse practitioner regardless and that the receptionist was abrupt. The lack of available appointments and the difficulty in having to ring a surgery at 8.00am or visit at that time, was commented on, not just in response to this question, but throughout the survey responses.

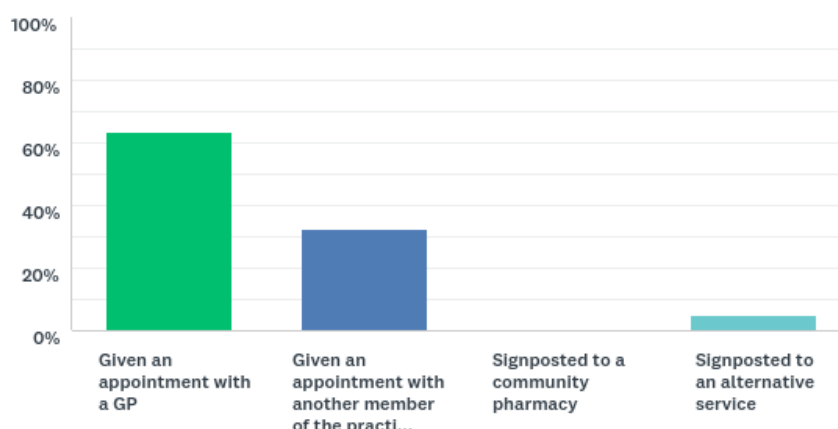
Although 71% of patients had confidence in the person they were talking to the concerns raised earlier were again highlighted. These included:

- That staff weren't qualified or medically trained staff
- A lack of confidentiality
- A sense that some staff weren't confident using the system
- Calls were rushed as the receptionist was under pressure to take the next call

The majority of patients, 76%, felt the information they received from the receptionist was clear and relevant with 73% of patients being happy with the outcome. Of those who weren't happy with the outcome, the majority of comments related to the length of time it took to get an appointment.

As a result of the navigation process the majority of patients were given an appointment with a GP:

Q10 As a result of the conversation were you (please tick all that apply):



We also gave patients the opportunity to share any other thoughts on Care Navigation with us and received 189 comments. A sample is listed below:

- Came to see the doctor but was told the nurse could sort it out - I don't mind as long as I get good service and get sorted out
- I have complete confidence in the professionalism and politeness of the surgery staff
- Awareness - Many members of the public don't understand the role of a GP receptionist and the reason they are asking these questions. If more people had the basic understanding of how the GP receptionist, nurse practitioner, triage phone calls and community pharmacies actually worked this would break down the misconception that 'only' a doctor can help!
- Will hopefully save time by directing patients to correct person from the outset
- I'm happy with services provided but think older generation are not willing to discuss, will take time for people to accept new system
- New system works well and a flexible responsive service is much appreciated
- It's common sense but it would be a good idea to know what number in the queue you are
- The message on the phone set the expectations however this wasn't followed through with the receptionist. I felt I had to be pushy to gain any kind of appt and one with a nurse felt like I'd been fobbed off

## Observations and considerations

Care Navigation systems adopted by all the practices in County Durham is in its early stages of implementation with some practices not going live with the system until January/February 2019. Staff will continue to develop their skills and patients will become more used to, and confident with, the options offered for their treatment. However, we have gathered some valuable data, which can be used as a benchmark for the CCGs to determine the progress of the system and to influence delivery of Care Navigation in the future.

In the main Care Navigation is seen as a positive development by both staff and patients but more could be done to improve the service. Whilst 79% of staff felt the system was working well on a day to day basis we received many comments on how the system could be improved. Some have been highlighted in this report but the

full list of comments should be read to better understand the needs of staff delivering the service.

Training - this was a theme that emerged across several questions, both in relation to training new staff and ongoing training for staff who are already using the system. Consideration should be given to responding to this need as staff commented that they felt this was important to support staff to develop their confidence and skills base.

Staff commented that they are unclear as to how the link to external services actually works once they have signposted a patient. Further clarity on this would be helpful for staff as would additional information on waiting/opening times for these services.

Additional external services that staff would like to navigate to included physiotherapy and dental services. It would be helpful for staff to know what the future plans are to bring additional services onto the system.

Staff made some specific comments around receiving updates eg feedback showing what difference care navigation had made to GP appointments and sharing best practice between surgeries. Communicating positive messages to staff via newsletters etc could be considered.

Forty four comments were received from staff on various topics, ranging from suggestions on how to improve the system to general comments on the role of Care Navigation in Primary Care services. These should be considered in full as they could have a positive impact on future delivery.

Feedback highlighted that 25% patients did not hear a message when they telephoned to make an appointment. The CCGs could re-iterate the importance of this message and ask all practices to ensure a message is relayed explaining the purpose of Care Navigation.

Respondents repeatedly made the comment that the receptionist was not qualified to deal with their problem. Surgeries could relay in their telephone message that navigators are trained to take the call but will not make a clinical decision, as this message is currently not getting across to patients.

Comments were made about the recorded telephone message being frustratingly long, particularly when having to ring repeatedly at 8.00am. Could the option to skip the message after it's been played once be considered? Patients also asked if the telephone systems could tell them their number in the queue.

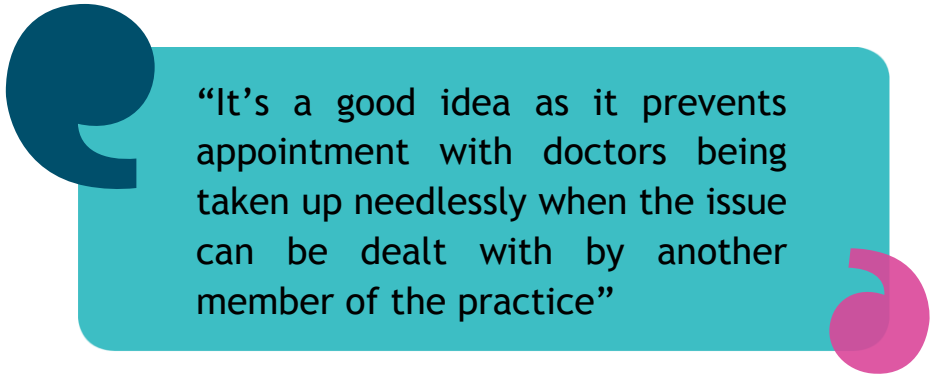


Consideration should be given to patients with hearing loss as they reported that they found the system difficult to access. Technology could be used to support these patients.

Whilst 69% of patients were happy to explain to the receptionist the reason for their call, those who weren't happy still had concerns about confidentiality and privacy. All surgeries should look at their reception areas and call handling to ensure they are maximizing the opportunity for patients to speak in private.

We received forty two comments when we asked if patients felt they were listened to, citing a formulaic script, requesting an appointment with a GP but not being given one and abrupt receptionists as some of the reasons why. Could this issue be addressed through training?

Although we were not asking patients about their experiences of getting an appointment with a GP, many of the comments we received related to this. The lack of available appointments, the difficulty of having to ring the surgery at 8.00am or visit at that time and the length of time patients had to wait before they were able to see a GP were repeatedly raised. Could patients' concerns be partially addressed by providing further information on Care Navigation that highlights the aim of reducing the demand for GP appointments?



“It’s a good idea as it prevents appointment with doctors being taken up needlessly when the issue can be dealt with by another member of the practice”

# Thank You

We would like to thank staff who took the time out of their busy day to complete our survey and the GP surgeries who allowed us to speak to patients. We would also like to thank our partners who kindly shared our survey with the general public including Patient Reference Groups and our volunteers who gave up their time to talk to patients on our behalf.

## Appendices

### Appendix 1: Care Navigation Staff Survey

Healthwatch County Durham has been asked by the two Clinical Commissioning Groups in County Durham to gather feedback on the impact Care Navigation has had on patient and staff experience in Primary Care. The CCGs are keen to ensure that staff implementing Care Navigation have the opportunity to give their views on their experiences and to use this feedback to develop the programme across the county in the future.

Our role is to carry out an independent, confidential evaluation of Care Navigation. All responses are anonymous and any feedback that we share with the CCGs will remain so. Our aim is to find out what is working well and what could be done better and our findings will be published in a report with a set of recommendations, which we will share with you.

1. When did you go live with Care Navigation  
 June      July      August      September      October      Not yet

2. Day to day, is Care Navigation working well for you?  
 Yes                  No

3. Day to day, what could be improved about the use of Care Navigation?

4. To implement the programme have you felt supported by (circle all that apply):  
 Practice Manager   GP      Other reception / admin staff                  Other practice staff      CCG      PPG

5. Do you feel you have sufficient knowledge to enable you to implement Care Navigation effectively in your practice?  
 Yes                  No

6. If 'No' what else would you like?

7. Do you feel you have sufficient information regarding the external services you can signpost patients to, to support them with their queries?  
 Yes                  No

8. If 'No' what additional information would you like?

9. How helpful have you found the external services to be?  
Very helpful                      Somewhat helpful              Unhelpful

10. Are there any other external services that you would like to navigate patients to?  
Yes                      No

11. If 'Yes', which services?

12. Is there any further on-going support that you would find helpful?  
Yes                      No

13. If 'Yes', what support?

14. If there is anything else you would like to tell us about Care Navigation please use this box:

15. Has your practice implemented the E-Consult programme for those patients who book appointments online?  
Yes                      No                      Unsure

16. If yes how is this working alongside Care Navigation in your practice?

Surgery name (optional):

## Appendix 2: Care Navigation Patient Survey

Healthwatch County Durham has been asked by the two Clinical Commissioning Groups in County Durham to gather feedback on the impact Care Navigation has had on the patient's experience in Primary Care ie GP services. Care Navigation is the system where trained, non-clinical staff, talk to patients when they book an appointment, providing information about the professionals or services that may be suitable for a patient's needs.

Our role is to carry out an independent, confidential evaluation of Care Navigation. All responses are anonymous. Our aim is to find out what is working well and what could be done better. Many thanks.

**NB This survey is not open to people who booked their last appointment online**

Please circle your age group:

18 - 24yrs      25 - 49yrs      50 - 64yrs      65 - 79yrs      80yrs+

1. When did you last contact your GP practice to make an appointment with a GP? Please state month:

2. How did you make the appointment?

By telephone      Visited the surgery      Other

If 'Other', please tell us how:

3. If you made the appointment by telephone, did you hear a telephone message explaining that you would be asked some questions to best direct your enquiry?

Yes      No      Not sure

4. Were you happy to explain to the receptionist about the reason for your call/visit?

Yes      No      N/A

If 'No' can you tell us why?

5. Did you feel you were listened to?

Yes      No      N/A

If 'No' can you tell us why?

6. Did you have confidence in the person you were talking to?

Yes            No            N/A

If 'No' can you tell us why?

7. Was the information you received clear and relevant?

Yes            No            N/A

If 'No' can you tell us why?

8. Were you happy with the outcome of the conversation?

Yes            No            N/A

If 'No' can you tell us why?

9. As a result of the conversation were you (please tick all that apply):

- Given an appointment with a GP
- Given an appointment with another member of the practice staff
- Signposted to a community pharmacy
- Signposted to an alternative service

If there is anything else you would like to tell us about Care Navigation please use this box

Surgery name: